

**EXECUTIVE LOBBYING
REGISTRATION/ RENEWAL FOR
THE YEAR OF 2006**
(Fill in year.)

41
Executive Lobbyist Registration No

Instructions

- Print in ink or type.
- Complete form and return with \$110 registration fee to the Board of Ethics, 2415 Quail Dr., 3rd Floor, Baton Rouge, LA 70808, (225) 763-8777 or (800) 842-6630.
- Initial registrations must be submitted within 5 days of (1) employment as a lobbyist or (2) first action requiring registration. Registrations expire as of December 31 unless a renewal is submitted between December 1 and January 31.

FOR OFFICE USE ONLY

Postmark Date: 01/27/06

Ren. 2006

✓ # 3430

\$110.00 WTS

2006 JAN 27 10:11

OFFICE OF THE
CLERK OF THE BOARD
OF ETHICS

3060035

1. NAME Wilson Daniel M.
Last First MI

2. BUSINESS PHONE 225-382-0045
Area Code and Phone Number

3. FAX NUMBER 225-382-1227

4. BUSINESS ADDRESS One American Place, Suite 1018, Baton Rouge, LA 70825
Street and No. City State Zip

MAILING ADDRESS P. O. Box 374, Baton Rouge, LA 70821
Street and No. City State Zip

5. EMPLOYER BellSouth

6. EMPLOYER'S ADDRESS 365 Canal St., Suite 3000, New Orleans, LA 70130-1102
Street and No. City State Zip

7. LIST BELOW (a) Names of persons, groups, or organizations which you represent and on whose behalf expenditures are made; (b) the address of each such person, group, or organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby.

1. Name BellSouth

Address 365 Canal St., Suite 3000, New Orleans, LA 70130-1102

Business or purpose Telecommunications

Does this person pay you? Yes

If No, who pays you? _____

HAND DELIVERED

**EXECUTIVE LOBBYING
REGISTRATION FORM**

Executive Lobbyist Registration No. _____

2. Name _____

Address _____

Business or purpose _____

Does this person pay you? _____

If No, who pays you? _____

3. Name _____

Address _____

Business or purpose _____

Does this person pay you? _____

If No, who pays you? _____

4. Name _____

Address _____

Business or purpose _____

Does this person pay you? _____

If No, who pays you? _____

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; and that no information required by LSA-R.S. 49:71 et seq. has been deliberately omitted.

Daniel M. Halson
Signature of Lobbyist

ATTACH
2" x 2"
PHOTOGRAPH
HERE